## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10828299

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                       |                                       |                  |                  | 1       | SMALL ENTITY TYPE  |                        |          | OTHER THAN<br>SMALL ENTITY |                        |  |
|---|--|---|-----------------------|---------------------------------------|------------------|------------------|---------|--------------------|------------------------|----------|----------------------------|------------------------|--|
| TOTAL CLAIMS  |  |   | 21                    |                                       |                  |                  |         | RATE               | FEE                    | 7        | RATE                       | FEE                    |  |
| FOR   |  |   | NUMBER FILED          |                                       | NUMBER EXTRA     |                  |         | BASIC FE           | E 385.00               | OR       | BASIC FEE                  | 770.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |  |   | 2/ mi                 | nus 20=                               | • /              |                  |         | X\$ 9=             |                        | OR       | X\$18=                     | 17                     |  |
| INDEPENDENT CLAIMS  |  |   | 3 minus 3 = "         |                                       |                  |                  |         | X43=               |                        | OR       | X86=                       | 1.0                    |  |
| Мι  | JLTIPLE DEPE   | NDENT CLAIM P                             | RESENT                |                                       |                  |                  |         | 145                |                        | 7        | 200                        |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column :              |  |   |                       |                                       |                  | column 2         |         | +145=              |                        | OR       | +290=                      | 200                    |  |
| CLAIMS AS AMENDED - PART II   |  |   |                       |                                       |                  |                  |         | TOTAL              |                        | OR       | TOTAL                      | THAN                   |  |
|   |  | (Column 1)                                | (Column 2) (Column 3) |                                       |                  |                  |         | SMALL ENTITY O     |                        |          | OTHER THAN OR SMALL ENTITY |                        |  |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                       | HIGHE<br>NUMB<br>PREVIO<br>PAID F     | ER<br>USLY       | PRESENT<br>EXTRA |         | RATE               | ADDI-<br>TIONAL<br>FEE |          | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus                 | **                                    |                  | =                |         | X\$ 9=             |                        | OR       | X\$18=                     |                        |  |
|   | Independent  |   | Minus                 | ***                                   |                  | =                | Ī       | X43=               |                        | OR       | X86=                       |                        |  |
|   | FIRST PRESE  | ENTATION OF MI                            | JLTIPLE DEF           | PENDENT                               | CLAIM            |                  |         | +145=              |                        | OR       | +290=                      |                        |  |
| 1 8 16  |  |   |                       |                                       |                  |                  |         | TOTAL              |                        | ا ا      | TOTAL                      |                        |  |
| (Column 1) (Column 2) (Column 3)  |  |   |                       |                                       |                  |                  |         | DDIT. FEE          |                        | <b>]</b> | ADDIT. FEE                 |                        |  |
| <b>#</b>  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | •                     | HIGHE<br>NUMB<br>PREVIOU<br>PAID F    | ST<br>ER<br>JSLY | PRESENT<br>EXTRA | ſ       | RATE               | ADDI-<br>TIONAL<br>FEE |          | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | •   | Minus                 | **                                    |                  | =                | Ī       | X\$ 9=             |                        | OR       | X\$18=                     |                        |  |
|   | Independent  | •   | Minus                 | ***                                   |                  | =                | t       | X43=               |                        | OR       | X86=                       |                        |  |
|   | FIRST PRESE  | NTATION OF MU                             | ILTIPLE DEP           | ENDENT (                              | CLAIM            |                  | T       | +145=              |                        | OR       | +290=                      |                        |  |
|   |  |   |                       |                                       |                  |                  | L<br>Al | TOTAL<br>ODIT. FEE |                        | _ L      | TOTAL<br>DDIT. FEE         |                        |  |
|   |  | (Column 1)                                | :                     | (Column                               |                  | (Column 3)       | •       |                    | •                      |          |                            | ·                      |  |
| MEN   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                       | HIGHES<br>NUMBE<br>PREVIOU<br>PAID FO | R<br>ISLY        | PRESENT<br>EXTRA |         | RATE               | ADDI-<br>TIONAL<br>FEE |          | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus                 | **                                    |                  | =                |         | X\$ 9=             |                        | OR       | X\$18=                     |                        |  |
|   | Independent  |   | Minus                 | ***                                   |                  | =                |         | X43=               |                        | OR       | X86=                       |                        |  |
| 1   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                       |                                       |                  |                  |         |                    |                        | ı        | +290=                      |                        |  |
| • If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |   |                       |                                       |                  |                  |         |                    |                        |          |                            |                        |  |
| H   | ** If the *Highest Number Previously Paid For IN THIS SPACE is less than 20, enter *20.*  *** ADDIT. FEE DOR AD |   |                       |                                       |                  |                  |         |                    |                        |          |                            |                        |  |